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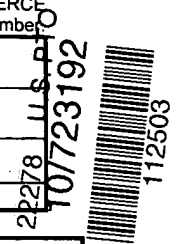
PTO/SB/05 (12/97)

Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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|--|--|---------------------|-------------|-----------|
| UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b)) | Attorney Docket No. | 140312-1/YOD | Total Pages | 56 |
| | GERD:0073 | | | |
| | First Named Inventor or Application Identifier Srikanth Suryanarayanan | | | |
| | Express Mail Label No. EV 410 034 000 US | | | |



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|--|--|
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231 |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Specification Total Pages 25 (preferred arrangement set forth below) -Descriptive -Cross References to Related Application -Statement Regarding Fed sponsored R & D -Reference to Microfiche Appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) Total Sheets 4 Total Pages 12 4. Oath or Declaration a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below] i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. | 6. <input type="checkbox"/> Microfiche Computer Program (Appendix) 7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (where there is an assignee) 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) 14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application Statement(s) Status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Other |
| 17. <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: / | |

| | | | | | |
|---|--|--------------------------|--|--------------------|--|
| 18. CORRESPONDENCE ADDRESS | | | | | |
| <input type="checkbox"/> Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) | | | <input checked="" type="checkbox"/> Correspondence address below | | |
| NAME Patrick S. Yoder Fletcher Yoder | | | | | |
| ADDRESS P.O. Box 692289 | | | | | |
| CITY Houston STATE Texas ZIP CODE 77269-2289 | | | | | |
| COUNTRY USA | | TELEPHONE (281) 970-4545 | | Fax (281) 970-4503 | |

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FEE TRANSMITTAL**Complete if Known**

| | |
|------------------------|--------------------------|
| Application Number | unassigned |
| Filing Date | herewith |
| First Named Inventor | Srikanth Suryanarayanan |
| Group Art Unit | unknown |
| Examiner Name | unknown |
| Attorney Docket Number | 140312-1/YOD (GERD:0073) |

TOTAL AMOUNT OF PAYMENT (\$)1,238.00**METHOD OF PAYMENT (check one)**

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 06-1315/140312-1/YOD (GERD:0073)Deposit Account Name FLETCHER YODER

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 ☐ Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.31(b)

2. ☒ Payment Enclosed:

☐ Check ☐ Money Order ☒ Other

PTO-2038**FEE CALCULATION (fees effective 10/01/96)****1. FILING FEE**

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|------------------------|--------------------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1001 | 770 | 2001 | 375 | Utility filing fee | <u>770.00</u> |
| 1002 | 330 | 2002 | 165 | Design filing fee | — |
| 1003 | 520 | 2003 | 260 | Plant filing fee | — |
| 1004 | 750 | 2004 | 375 | Reissue filing fee | — |
| 1005 | 160 | 2005 | 80 | Provisional filing fee | — |
| SUBTOTAL (1) | | | | | (\$) <u>770.00</u> |

2. CLAIMS

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|---|--------------------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1202 | 18 | 2202 | 9 | Claims in excess of 20 | — |
| 1201 | 84 | 2201 | 42 | Independent claims in excess of 3 | — |
| 1203 | 280 | 2203 | 140 | Multiple dependent claim | — |
| 1204 | 84 | 2204 | 42 | Reissue independent claims over original patent | — |
| 1205 | 18 | 2205 | 9 | Reissue claims in excess of 20 and over original patent | — |
| SUBTOTAL (2) | | | | | (\$) <u>428.00</u> |

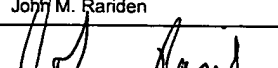
FEE CALCULATION (continued)**3. ADDITIONAL FEES**

| Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid |
|---------------------|-----------------|----------------|-----------------|--|-------------------|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | — |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing or cover sheet | — |
| 139 | 130 | 139 | 130 | Non-English specification | — |
| 147 | 2,520 | 147 | 2,520 | For filing a request for reexamination | — |
| 112 | 920 | 112 | 920 | Requesting publication of SIR prior to Examiner action | — |
| 113 | 1,840 | 113 | 1,840 | Requesting publication of SIR after Examiner action | — |
| 115 | 110 | 215 | 55 | Extension for response within first month | — |
| 116 | 400 | 216 | 200 | Extension for response within second month | — |
| 117 | 950 | 217 | 475 | Extension for response within third month | — |
| 118 | 1,570 | 218 | 755 | Extension for response within fourth month | — |
| 119 | 310 | 219 | 155 | Notice of Appeal | — |
| 120 | 310 | 220 | 155 | Filing a brief in support of an appeal | — |
| 121 | 270 | 221 | 135 | Request for oral hearing | — |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | — |
| 140 | 110 | 240 | 55 | Petition to revive unavoidably abandoned application | — |
| 141 | 1,320 | 241 | 660 | Petition to revive unintentionally abandoned application | — |
| 142 | 1,320 | 242 | 660 | Utility issue fee (or reissue) | — |
| 143 | 450 | 243 | 225 | Design issue fee | — |
| 144 | 670 | 244 | 335 | Plant issue fee | — |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | — |
| 123 | 50 | 123 | 50 | Petitions related to provisional applications | — |
| 126 | 240 | 126 | 240 | Submission of Information Disclosure Stmt | — |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | <u>40.00</u> |
| 146 | 790 | 246 | 395 | Filing a submission after final rejection (37 CFR 1.129(a)) | — |
| 149 | 790 | 249 | 395 | For each additional invention to be examined (37 CFR 1.129(b)) | — |
| Other fee (specify) | | | | | — |
| Other fee (specify) | | | | | — |
| SUBTOTAL (3) | | | | | (\$) <u>40.00</u> |

* Reduced by Basic Filing Fee Paid

SUBMITTED BY

Complete (if applicable)

| | | | |
|-----------------------|---|-----------------------|----------------------------------|
| Typed or Printed Name | John M. Rariden | Reg. Number | 54,388 |
| Signature |  | Date | 11/25/03 |
| | | Deposit Acct. User ID | 06-1315/140312-1/YOD (GERD:0073) |